## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09/786289

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER	
TC	TAL CLAIMS							RATE	FEE		RATE	FEE
FO	R		NUMBER FILED		NUMBEP. EXTRA			BASIC FEE	355.00	OR	BASIC FEE	840
то	TAL CHARGEA	BLE CLAIMS	14 minus 20=		. –			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS 2				minus 3 =				X40=		OR	X80≈	
MULTIPLE DEPENDENT CLAIM PRESENT .								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							.	TOTAL		OR	TOTAL	840
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	ENTITY	ÓR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=			+270=	
										OR	TOTAL	
10-12-04 (Column 1) (Column 2) (Column 3)								ADDIT. FEE		OR	ADDIT. FEE	
	V / X : V · /	CLAIMS		HIGH		(Column 3)	1 1	· · · · · · · · · · · · · · · · · · ·	ADOL	1	1	ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE
	Total	. 10	Minus	· ć	20	= 0		X\$ 9=	/	OR	X\$18=	0
	Independent	· ' 2	Minus	***	3	= D		X40=	1	OR	X80=	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT ČLAIM						)	+135=			+270=	0
							ı	TOTAL	/	OR	TOTAL	
ADDIT, FEE												U
		(Column 1) CLAIMS		(Colui		(Column 3)	1 .					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=	1	X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=	]	X40=			X80=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						] }			OR		
											+270=	
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		mber Previously Pai hber Previously Pai					er fou	ind in the app	ropriate box	in col	lumn 1.	